## INDIANO VAUGHAN ROBERTS & FILOMENA, P.A.

August 26, 2003

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## PATENT APPLICATION

Assistant Commissioner for Patents Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing under 35 U.S.C. 1.111 and 37 C.F.R. 1.53 is the patent application of:

Applicants: Moenning and Irlbeck

Title: DENTAL ANESTHESIA ADMINISTRATION MASK AND

EYE SHIELD

Atty. Docket No.: 7432-0046

Enclosed are:

X Specification (#8 pages)
X Claims (33 claims)
X Drawings (23 sheets)
X Abstract

Certificate	of Express	Mailing	Under	1.10

I hereby certify that this paper or fee (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service as "Express Mail, Post Office to Addressee" by the certificate number set forth in an envelope addressed to the Commissioner for Patents, P.O. Box 1450 Alexandria, VA 22313-1450.

Date: Tuesday, August 26, 2003	
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Marianne E. Morris	

**Preliminary Amendment** 

Exp. Cert. No.: <u>EL979755169US</u>

178 178
Declaration and Power of Attorney (unsigned)
Assignments of the invention
Check for \$576.00 (filing fee)
Priority Document
Information Disclosure Statement
Form PTO-1449
Copies of Cited References

	NUMBER FILED	NUMBER EXTRA	RATE	FEE	
BASIC FEE (37 C.F.R. 1.16 (a))			\$750	\$750	
TOTAL CLAIMS (37 C.F.R. 1.16(c))	33	13	x\$18	\$ 234	
INDEPENDENT CLAIMS (37 CFR 1.16(b))	5	2	x\$84	\$ 168	
MULTIPLE DEPENDENT CLAIM PRESENT	(37 C.F.R. 1.16(d))		\$270		
NUMBER EXTRA MUST BE ZERO OR LARGER	TOTAL	\$1,152.00			
If applicant has small entity status under 37 C.F.R. 1.9 and 1.27, then divide total fee by 2, and enter amount here.			SMALL ENTITY TOTAL	\$576.00	

FEE FOR RECORDING ASSIGNMENT		_
TOTAL FEES	\$576.00	

The Commissioner is hereby authorized to charge any additional filing fees under 37 C.F.R. 1.16 or processing fees under 37 C.F.R. 1.17 which may be required, or credit of any overpayment, to Account No. 50-1590. A duplicate copy of this sheet is enclosed.

Attorney of Record

Printed Name: E. Victor Indiano

Registration No.: 30,143